

FUN & CREATIVE ACTIVITIES FOR ALL CHILDREN GRADES KINDERGARTEN AND UP!

SCOUTING
IS HERE AT
HAGEDORN
LITTLE VILLAGE!



SCOUTS LEARN ABOUT CITIZENSHIP, COMMUNITY INVOLVEMENT, FIRST AID, LEAVE NO TRACE AND SO MUCH MORE!



JOIN OUR PACK TODAY!

CUR SCOUTS

Hagedorn Little Village

750 Hicksville Road Seaford, NY 11783

*Parent/Guardian must be present and available to assist as needed

Time: Tuesday at 4pm
- Twice a month

Cost: Annual Youth fee of \$170 and \$10 monthly dues

For questions or more info:

Danielle Colucci - 516-520-6006 danielle.colucci@littlevillage.org

You're not going to want to miss this!

BSA YOUTH MEMBER APPLICATION—Must be completed by the youth's parent or legal guardian

-	ייר האירות האירות	N-IMIOSI DE COMPIECE	ON — Must be completed by the youth's parett of legal guardian		
First name (Full legal name)	Middle name	Last name	lame	Suffix Preferred nickname	nickname
Country Home address		City		State Zi	Zip code
Phone School	Date of birth (mm/dd/yyyy)	Grade	Ethnic background: O Black/African American O Caucasian/White O Hispanic/Latino Youth email address	O Native American O Alaska Native O Male O Pacific Islander O Asian	Gender: OMale Scout Life subscription
PARENT/LEGAL GUARDIAN INFORMATION ☐ Mark here if address is same as above. ☐ Mark here if you are the Lion or Tiger adult parther. Select relationship: OParent OLegal Guardian	ATION re if you are the Lion or Tiger adult partner.	☐ Mark here if the Lion or application and indicate	Mark here if the Lion or Tiger adult partner is not the p application and indicate their relationship below.	☐ Mark here if the Lion or Tiger adult partner is not the parent or legal guardian. Have the adult partner complete and attach an adult application and indicate their relationship below.	and attach an adult
First name (Full legal name)	Middle name	Last name	ame	Suffix Preferred nickname	nickname
Country Home address		City		State Zi	Zip code
Primary phone	of birth (mm/dd/	Occupation		Employer Gender:	der:
Alternate phone	Ext. Previous Sco	Previous Scouting experience			
I have read the attached information for parents and approve the application. I affirm that I have or will review How to Protect Your Children From Child Abuse: A Parent's Guide.	and approve the w to Protect Your		Parent/legal guardian email address	nail address	
Signature of parent/legal guardian	Date	To be completed by unit	unit		
Signature of unit leader (or designee) Unit type: OPack OTroop Ocrew	Ship □ Lone Cub Scout	☐ Has earned Arrow of Light	If applicant has unexpired no charge by transferring t	If applicant has unexpired membership certificate, registration may be accomplished at no charge by transferring the registration or multiple registering.	mplished at
Unit No.: For pack registration select one:	OLion	If OBear ()Webelos	☐ Transfer application E ☐ Multiple application fr	Enter membership number from unexpired certificate:	
New member fee \$ Council fee \$		>		Unit OPack OTroop Unit No. or district name: type: Ocrew OShip	
Registration fee \$ Scout Life fee \$	PAID: □ Cash	□ Che	☐ Check No.	☐ Credit card	